

Patient Name

Date of Birth: January 1, 1945

Hospital Discharge Date: June 4, 2012

Discharge Diagnosis: Congestive Heart Failure, UTI

Allergies/Adverse reactions: Aspirin (hives)

MEDICINE LIST as of June 4, 2012

CURRENT MEDICINES

1. SIMVASTATIN 80MG TAB \*NEW\*

TAKE ONE HALF TABLET (40MG) FOR REDUCING CHOLESTEROL

Are you taking the Simvastatin as described?

Yes ☐ No ☐ If no, please explain:

2. CHOLECALCIFEROL (VIT D) 1,000 UNIT TAB

TAKE ONE TABLET BY MOUTH EVERY DAY FOR BONE STRENGTH

Are you taking the Vitamin D as described?

Yes ☐ No ☐ If no, please explain:

Non-VA, OVER-THE-COUNTER (VITAMIN, SUPPLEMENT) MEDICINES

1. POTASSIUM CHLORIDE 10MEQ SA CAPSULE

TAKE ONE CPASULE BY MOUTH EVERY DAY

Are you taking the Potassium Chloride as described?

Yes ☐ No ☐ If no, please explain:

STOPPED MEDICINES

1. SULFAMETHOXAZOLE 800MG/ TRIMETHOPRIM 160MG TABLET (BACTRIM)

TAKE ONE TABLET BY MOUTH TWICE A DAY FOR INFECTION FOR 10 DAYS

Have you stopped taking the Bactrim?

Yes ☐ No ☐ If no, please explain:

EXPIRED MEDICINES

1. FINASTERIDE 5MG TABLET

TAKE ONE TABLET BY MOUTH EVERY DAY FOR PROSTATE

Have you stopped taking the Finasteride?

Yes ☐ No ☐ If no, please explain:

OTHER MEDICINES NOT LISTED

Please list any medicine that you are taking that have not been mentioned (include medicine name, dose, how many times per day, doctor/pharmacy):

QUESTIONS

What questions do you have about your medicines? Please type here.